

UNITED STATES CCURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL

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SEC USE ONLY

Serial

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Prefix

☐ Estimated

## 1300487

# FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

	UNIFORM LIMITED OFFERING	G EXEMP	ION .	
Name of Offering ( check if this is an a Braeside Capital, L.P., a Private Offering	amendment and name has changed, and indicate of	change.)		
Filing Under (Check box(es) that apply): Type of Filing:  New Filing	Rule 504 Rule 505	Rule 506	Section 4(6)	TALES AND THE TALE OF THE TALE
	A. BASIC IDENTIFICATI	ON DATA	alig 1	7 2004
1. Enter the information requested about the	issuer			
Name of Issuer ( check if this is an Braeside Capital, L.P.	amendment and name has changed, and indicate	change.)	297	08 /\$
Address of Executive Offices 5001 LBJ Freeway, Suite 700, Dallas, Tex	(Number and Street, City, State, as 75244	Zip Code)	Telephone Number (Including Art (972) 387-7370	žá Góde)
Address of Principal Business Operations	(Number and Street, City, State,	Zip Code)	Telephone Number (Including Are	ea Code)
(if different from Executive Offices)				*
Brief Description of Business Inves	tment Partnership			BBB 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8
Type of Business Organization				PKOCE22E
☐ corporation	limited partnership, already formed		other (please specify):	AUG 12 2004
business trust	☐ limited partnership, to be formed			wan T ← Tana
	Month	Year		THOMSON

#### **GENERAL INSTRUCTIONS**

Actual or Estimated Date of Incorporation or Organization:

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

3

CN for Canada; FN for other foreign jurisdiction)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State:

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

			CIFICATION DATA		
2. Enter the informatio	•	•			
•		has been organized within the			
		to vote or dispose, or direct the			
		orporate issuers and of corporate	e general and managing partner	s of partnership issue	ers; and
***************************************	anaging partner of p	<del></del>		<del></del>	
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in	idividual)				
Braeside Management, L.P. Business or Residence Address	(Number and Stree	t, City, State, Zip Code)			
5001 LBJ Freeway, Suite 700.	Dallas, Texas 7524	14			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if in	idividual)				
Braeside Investments, LLC (g Business or Residence Address					
5001 LBJ Freeway, Suite 700,	Dallas, Texas 7524	14			
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if it	ndividual)				
McIntyre, Steven					
Business or Residence Address	(Number and Stree	t, City, State, Zip Code)			
5001 LBJ Freeway, Suite 700	Dallas, Texas 752	14			
Check Box(es) that Apply:	<b>▼</b> Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if it	ndividual)				
Stein, Todd					
Business or Residence Address	(Number and Stree	t, City, State, Zip Code)			
5001 LBJ Freeway, Suite 700	Dallas, Texas 752	14			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Business or Residence Address	(Number and Stree	et, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if in	ndividual)				
Business or Residence Address	(Number and Stree	t, City, State, Zip Code)			
C'heck Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or
Full Name (Last name first, if it	ndividual)				Managing Partner
, , , , , ,	,				
Business or Residence Address	(Number and Stree	et, City, State, Zip Code)			·
		plank sheet, or copy and use add		<del></del>	

														1.11	
					B.	INFORM	IATION A	ABOUT (	OFFERIN	G					
														Yes	No
1.	Has the issue	r sold, or do	es the issue	er intend to										×	Ш
_								umn 2, if fi							
2.	What is the n		vestment th er by Gene			m any indiv	/idual?							. \$ <u>750</u>	* 000,
	Subje	ct to waive	er by Gene	i ai i ai tile										Yes	No
3.	Does the offe	ring permit	ioint owner	rship of a si	ingle unit? .									×	П
4.	Enter the int		•	•	U										
	remuneration agent of a bro	for solicita ker or deal	ition of pure er registere	chasers in o	connection SEC and/or	with sales of with a stat	of securities e or states,	s in the offer	ering. If a property	person to b oker or dea	e listed is a aler. If mor	n associate	ed person o	r	
Full	to be listed at I Name (Last na				oker or deal	er, you may	set forth u	ne informat	ion for that	broker or d	lealer only.				
		inc mat, n	marridaarj												
	t Applicable siness or Reside	nce Addres	s (Number	and Street	City State	Zin Code)									
200			2 (		ony ourse,	2.p 0000)									
N I	ne of Associate	d Dualian as	Desley												
ivar	ne of Associate	a Broker of	Dealer												
	- 177														
Stat	tes in Which Pe	rson Listed	Has Solicit	ed or Inten	ds to Solici	t Purchaser	S								
	(Check "A	ll States" o	r check indi	ividual Stat	es)									All St	ates
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]		
Full	l Name (Last na		<del></del>						<u></u>	<u>t</u>			[]		
Bus	siness or Reside	nce Addres	s (Number	and Street,	City State,	Zip Code)			_		-				
Nar	me of Associate	d Broker or	· Dealer												
Stat	tes in Which Pe	rson Listed	Has Solicit	ted or Inten	ds to Solici	t Purchaser	<u> </u>			·····		<del></del>			
	,		r check indi		·			mei	rpcı	reri	(CA)	run	шы	All St	ates
	[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]		
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	4,	
E1	[RI] I Name (Last na	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
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Bus	siness or Reside	nce Addres	s (Number	and Street.	City State.	Zin Code)									
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N		d Duction of	Dealer												
ivai	me of Associate	a Broker of	Dealer												
Sta	tes in Which Pe	rson Listed	Has Solicit	ted or Inten	as to Solici	t Purchaser	S								
	(Check "A	ll States" o	r check ind	ividual Stat	tes)	,								All St	ates
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
	(IL) (MT)	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
	[IVI I]	(SC)	[SD]	(TMI)	(TV)	(LIT)	[NT]	[VA]	[1412]	[WW]	[WII]	(WV)	(DD)		

[TN] [TX] [UT] [VT] [VA] [WA] [WV] [W (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	E OF PROCE	EDS		
ł.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of securities offered for exchange and already exchanged.				
	Type of Security	Aggregate Offering Price		Amo	ount Already Sold
	Debt	\$		\$	
	Equity	\$		\$	
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$		\$	
	Partnership Interests	\$200,000,000		\$1	,763,369.83
	Other (Specify:	\$		\$	****************
	Total	\$ <u>200,000,000</u>		\$ <u>1</u>	,763,369.83
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	i			
		Number Investors		Dol	Aggregate lar Amount Purchases
	Accredited Investors	0		\$_	0
	Non-accredited Investors	8		\$ <u>1</u>	,763,369.83
	Total (for filings under Rule 504 only)	N/A		\$_	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.			D	
	Type of offering	Type of Security		Do	llar Amount Sold
	Rule 505	N/A		\$	N/A
	Regulation A	N/A		\$	N/A
	Rule 504	N/A		\$	N/A
	Total	N/A		\$	N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	1			
	Transfer Agent's Fees	***************************************		\$	0
	Printing and Engraving Costs			\$	0
	Legal Fees	***************************************	×	\$	40,000
	Accounting Fees			\$	0
	Engineering Fees			\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify)			\$	0

	b. Enter the difference between the aggrega and total expenses furnished in response to Part proceeds to the issuer."		\$ <u>199,</u>	960,000	
5.	of the purposes shown. If the amount for any pur	roceeds to the issuer used or proposed to be used for each pose is not known, furnish an estimate and check the box tents listed must equal the adjusted gross proceeds to the b above.			
				Payments to Officers, Directors, and Affiliates	Payments to Others
	Salaries and fees		×	\$(1)	□ s
	Purchase of real estate			\$	□ s
	Purchase, rental or leasing and installation of maci	hinery and equipment		\$	□ s
	Construction or leasing of plant buildings and faci	ilities		\$	□ s
	Acquisition of other businesses (including the value may be used in exchange for the assets or securities	ue of securities involved in this offering that		\$	□ s
	•			\$	□ s
	• -			\$	□ s
	Other (specify): Purchase and sell securities			\$	<b>\$199,960,000</b>
	Column Totals			\$(1)	\$ <u>199,960,000</u>
	Total Payments Listed (column totals added)				\$ <u>199,960,000</u>
(1) 7	he General Partner of the Issuer will be entitled	to receive management fees of up to 1% of the Subscrip	tion (	Commitment of each	Limited Partner.
		D. DEDDE AT GLOSLASTING			· · · · · · · · · · · · · · · · · · ·
		D. FEDERAL SIGNATURE			
an u		e undersigned duly authorized person. If this notice is filed ties and Exchange Commission, upon written request of its of Rule 502.			
Issue	r (Print or Type)	Signature / 1		Date 2	
Bra	side Capital, L.P.	theht		August <u>5</u> , 200	94
Nam	e of Signer (Print or Type)	Title of Signer (Print or Type)			

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

ATTENTION

Steven McIntyre, Chief Investment Officer of Braeside Investments, LLC, the General Partner

of Braeside Management, L.P., the General Partner of the Issuer

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

Steven McIntyre

	E. STATE SIGNATURE
1	Yes No  Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?
	See Appendix, Column 5, for state response:
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
4	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.
The	issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized on.

Issuer (Print or Type)	Signature 1	Date					
Braeside Capital, L.P.	Link	August 2, 2004					
Name (Print or Type)	Title (Print of Pype)						
Steven McIntyre		Steven McIntyre, Chief Investment Officer of Braeside Investments, LLC, the General Partner of Braeside Management, L.P., the General Partner of the Issuer					

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APP	ENDIX				
1	Intend to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	4  Type of investor and amount purchased in State  (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA									
CO									
СТ									
DE									
DC									
FL									
GA									
НІ									
ID									
IL									
IN									
lA					<del></del>	1			
KS	X		\$100,000,000	0	0	2	\$613,335.28	N/A	N/A
KY									
LA						ļ			
ME					**************************************				
MD									
MA									
MI									
MN									
MS					-				
МО	<u> </u>								
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NE					· · · · · · · · · · · · · · · · · · ·				
NV									

	•			API	PENDIX				
1		2	3		<u> </u>	4			-
•	Intend to non-a investor	I to sell accredited is in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
NH									
NJ									
NM					•				
NY									
NC									
ND									
ОН									
OK									
OR									
PA	-								
RI									
SC	_								
SD									
TN									
TX	X		\$100,000,000	0	0	6	\$1,150,034.55	N/A	N/A
UT									
VT									
VA									
WA		]							
WV									
WI									
WY									
PR					<u> </u>				<u> </u>